MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

HEALTHY MICHIGAN FUND REPORT



For The Period October 1, 2003 to September 30, 2004

Healthy Michigan Funds are used to support behavioral and public health activities at the community level. Activities and accomplishments are evidence of positive steps being taken to reduce preventable death and disability in Michigan residents. These local activities have a direct impact on many of the 25 Michigan Critical Health Indicators.

This portion of the Healthy Michigan Fund Report presents highlights of FY 2004 accomplishments for all the Healthy Michigan Fund projects, their indicators of success, along with future goals for FY 2005

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Appropriations # - 11384 Alzheimer's Information Network

FY 04 Funds Appropriated \$290,000

FY 05 Funds Appropriated \$400,000

Alzheimer's Information Network Services*, FY2004			
	Number	Number of	
	Completed	Persons	
	1	Served**	
Consumer			
Help line calls	N/A	11,345	
Presentations	620	14,207	
Support Group	1694	15,587	
meetings			
Newsletters	N/A	164,228	
Professional			
Presentations	152	4,171	
Newsletters	N/A	24,724	
Other Services			
Exhibits	411	1809 hours	
Media	1024	N/A	
(radio/television)	C.L. C. C. NO		

Source: Diabetes, Dementia, & Kidney Section, MDCH.

Project Name: Alzheimer's Information Network

Target Population: The 210,000 persons in Michigan with dementia, more than 210,000 family care partners, and the health and human services professionals serving them.

Project Description: Around 210,000 residents have dementia due to Alzheimer's disease and related disorders. Preventable complications of dementia and excess disability lead to increased cost of care and increased demand for long-term care. Alzheimer's disease is the third most expensive disease in the country after heart disease and cancer. The Dementia Programs support the Michigan Dementia Coalition, which brings the expertise and resources of multiple agencies to bear on priority dementia issues. Through the Michigan Dementia Coalition, Michigan has a network of primary care physicians who serve as leaders in disseminating dementia best-care practices in the medical community. The Dementia Program also funds a network of community dementia agencies (Alzheimer's, Huntington's and Parkinson's) to provide information, education and support to caregivers. Statewide toll-free help lines, support groups, and education programs are critical services for families overwhelmed by the demands of care giving for persons with dementia.

Project Accomplishments for FY 2004:

- Provided information, referral, support and other assistance to more that 11,000 callers through toll-free help lines.
- Provided care consultation to more than 500 persons or families.
- Provided more than 600 educational presentations for consumers and 150 for professionals.
- Sponsored approximately 1,700 support group meetings.

- Provide information, referral, support and other assistance to 11,000 callers
- Continue providing care consultation services to persons and families.
- Continue providing educational programs and support groups.
- Conduct a public awareness campaign to increase public awareness of the early warning signs of dementia and where to go for information or assistance.
- Continue working with physicians to increase early identification of dementia and referral to community resources.

^{*}Network agencies funded by this Project receive funding from various sources along with HM Funds that contribute to these accomplishments.

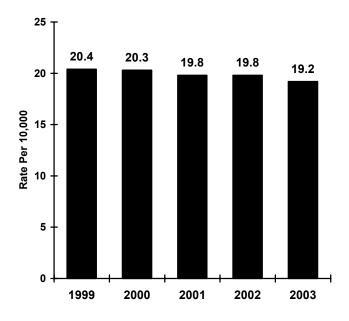
^{**}Participants may be counted more than once if they participated in more than one presentation

Appropriations # - 11352 Cancer Prevention and Control

FY 04 Funds Appropriated \$1,642,300

FY 05 Funds Appropriated \$3,155,600

Michigan Age-Adjusted Invasive Cancer Mortality Rates* per 10,000 Population, 1999 - 2003



Source: DVRHS, MDCH.

Project Name: Cancer Prevention and Control

Target Population: Adult residents of Michigan

Project Description: To reduce cancer mortality and morbidity in Michigan residents. Women served by the federally funded Breast and Cervical Cancer Control Program (BCCCP) also receive cardiovascular disease screening and interventions. If diagnosed with breast or cervical cancer through the BCCCP, women then qualify for treatment through Medicaid.

Project Accomplishments for FY 2004:

- BCCCP's assigned caseload was surpassed with 22,708 women age 40 64 receiving breast and cervical cancer screening and diagnostic services, with an additional 1,221 Family Planning clients with abnormal Pap smear results receiving colposcopy through the BCCCP.
- Over 3,200 BCCCP enrolled women received WISEWOMAN cardiovascular health interventions.
- Women enrolled in BCCCP receive high quality screening and diagnostic services through MPRO.
- Completed evaluation report including an analysis of the quality improvement initiative implemented within 5 health systems, with distribution via web to comprehensive cancer control partners to follow.
- Various recruitment strategies tested to increase the number of Michigan organizations addressing at least one state cancer priority. New recruitment and orientation strategies being proposed to enhance organizational commitment to impact all relevant state cancer control priorities.
- Special cancer and minority BRFS reports conducted to obtain data not obtained in the state BRFSS. The reports will evaluate progress toward the achievement of relevant cancer control priorities.

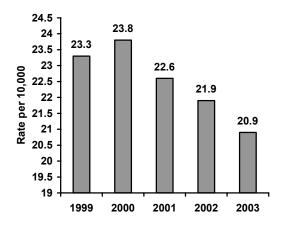
- Provide screening mammograms to 10,000 women 40 to 49 enrolled in the BCCCP
- Provide funds for state match to qualify for a federally funded cooperative agreement providing cardiovascular screening and interventions to BCCCP screened women in 9 local health jurisdictions.
- Oversee the BCCCP to assure that all women receive high quality breast and cervical cancer screening, diagnostics, and treatment that adhere to national and state policies.
- Plan and build capacity for a pilot colorectal cancer early detection program for uninsured individuals age 50 years and older
- Coordinate the Primary Care Initiative for a Healthier Michigan to produce a statewide strategic plan to improve chronic disease prevention and management in primary care settings and align with Michigan Steps Up Campaign.

^{*}Rate age-adjusted to 2000 US population standard using ICD-10 codes as of 1999

Appropriations # - 11380 Chronic Disease Prevention

FY 05 Funds Appropriated \$2,598,200

Michigan Age-Adjusted Popluation, Heart Disease Mortality Rate 1999-2003



Source: DVRHS, MDCH.

Project Name: Cardiovascular Health

Target Population: Michigan citizens with a special emphasis on high-risk populations

Project Description: To improve the management of risk factors related to heart disease and stroke, which decrease morbidity, premature mortality and healthcare costs. Funds are distributed through a competitive process.

- Implement quality improvement initiatives to improve adherence to standards of care for prevention, early detection and control of heart disease and stroke.
- Award grants to local health departments to build capacity and improve the health of the community through increasing physical activity, improving healthy eating and reducing tobacco use.
- Award grants to local communities and healthcare systems to implement initiatives aimed at the early detection and control of risk factors related to heart disease and stroke.

^{*}Rate age-adjusted to 2000 US population standard using ICD-10 codes as of

Appropriations # - 14254 Childhood Lead Programs

FY 05 Funds Appropriated \$1,000,000

MI Childhood Lead Poisoning Kids<6yrs w/Elevated Blood Lead Levels 7144 5712 4771 4243 4083 9.7% 3141 1.2% 5.4% 5.5% 1998 1999 2000 2001 2002 2003 # Kids w/EBLL -- % Kids w/EBLL

- Number portrays MI children age < 6 years confirmed with EBLL (venous test, >= 10 micrograms/deciliter)
- Percentage portrays the number above divided by the number of MI kids < 6 years tested in that calendar year.

Source: MDCH, Childhood Lead Prevention Project

Project Name: Childhood Lead Poisoning Prevention

Target Population: Infants & children younger than six years-old and pregnant women. Focus is the "targeted communities", where lead poisoning has greatest prevalence: Battle Creek, Benton Harbor, Flint, Grand Rapids, Hamtramck, Highland Park, Jackson, Kalamazoo, Lansing, Muskegon, Pontiac, and Saginaw.

Project Description: This project provides guidance and support for implementation of the priority "first steps" identified by the Governor's Task to Eliminate Childhood Lead Poisoning.

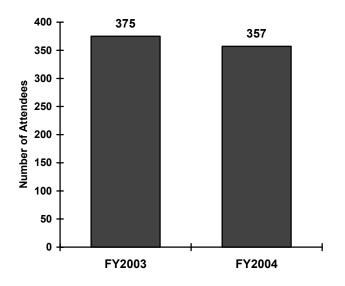
- Provide local consultation and grant writing support to community action agencies, etc. in the "targeted communities," the goal of which is establishment of local funding to be made available for lead-related interim controls and/or remediation in child-occupied homes.
- Provide expanded or enhanced case management services for all Michigan children with blood lead levels >20.
- Establish an electronic, voluntary "lead-safe housing" registry for rental properties built prior to 1978.
- Provide staff and logistical support for the State Lead Commission.
- Develop a remediation ombudsman role to provide individuals and communities consultation and direction to identify best options for interim controls and/or abatement and funding options available.
- Remediate or provide interim controls in child-occupied residences to the extent that funding level is approved and allowable.
- Initiate a media campaign to develop/increase public awareness regarding prevention and treatment of childhood lead poisoning.

Appropriations # - 11380 Chronic Disease Prevention

FY 04 Funds Appropriated \$50,000

FY05 Funds Appropriated 100,000

Number of Provider Attendees at a Pediatric Rheumatology Teleconference, FY 2003- 2004



Source: Arthritis Program reports, MDCH.

Project Name: Children's Arthritis

Target Population: Six-thousand Michigan children with potentially crippling childhood arthritis

Project Description: To prevent needless disability in children with arthritic conditions. With prompt, accurate diagnosis and appropriate treatment, irreversible joint damage can be prevented in most children. Primary care providers are often the first to see a child with arthritis. Providers may not recognize or may misdiagnose symptoms of such a relatively rare condition. This project increases awareness of appropriate diagnosis, management and referral for childhood arthritis among pediatricians, family practitioners, and other primary care providers.

Project Accomplishments for FY 2004:

- Disseminated *Critical Elements of Care for Juvenile Arthritis* to Michigan members of the American Academy of Pediatrics and the Michigan Academy of Family Practice.
- Tracking system for documents disseminated and target groups to whom they were distributed.
- Surveyed to evaluate impact of *Critical Elements of Care for Juvenile Arthritis* among providers.
- Provided Pediatric Rheumatology Update Grand Rounds programs at three community hospitals.
- Distributed information packets to 45 families of children with arthritis.
- Developed and pilot-tested a statewide arthritis risk factor survey.

Project Goals FY 2005

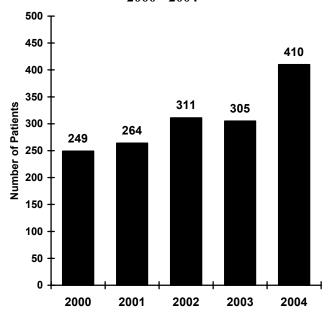
- Disseminate *Critical Elements of Care for Juvenile Arthritis* to key specialty care groups and via presentations at statewide conferences of those organizations.
- Provide Pediatric Rheumatology Update Grand Rounds programs with at least three community hospitals.
- Identify additional venues for Grand Rounds presentations to providers.
- Continue to distribute information packets to families of children with arthritis
- Plan and provide two educational programs for families that increase knowledge about juvenile arthritis treatment and management, which enable peer support.
- Enhance the website of the Arthritis Foundation Michigan Chapter (AFMC) to include updated information on the state Children's Arthritis Initiative.
- Implement the statewide arthritis risk factor survey and use data for program planning and evaluation.

Appropriations # - 14274 Dental Programs

FY 04 Funds Appropriated \$150,000

FY 05 Funds Appropriated \$150,000

Number of Patients Receiving Completed Dental Care, 2000 - 2004



Source: Oral Health Program, MDCH.

Project Name: Dental Health

Target Population: Mentally or physically handicapped persons who are medically compromised or elderly.

Project Description: Through a network of volunteer dentists, eligible patients are referred for comprehensive dental care. Two referral coordinators staff the toll-free phone line, process applications and match patients with volunteer dentists.

Project Accomplishments for FY 2004:

- 410 patients received completed dental care; a 3.4% increase from FY 03
- 5,660 dental procedures were provided; a 45% increase from FY 03
- 769 dentists volunteered; a .05% increase from FY 03
- \$832,351 of dental treatment was donated by dentists; a 27% increase from FY 03
- 180 dental laboratories donated \$95,140 in laboratory services; a 63% increase in donated services from FY 03
- A total of \$927,491 donated by Michigan dentists and dental laboratories for dental treatment, a 31% increase from FY 03.

Project Goals for FY 2005

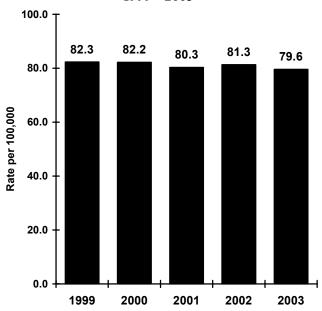
- Recruit dentists to have a corps of 1,000 volunteer dentists distributed throughout the state.
- Provided \$1,000,000 worth of donated dental treatment for 435 individuals.
- Provide \$100,000 worth of donated laboratory fabrications.
- Increase distribution of volunteer dentists to have 75% of the counties in Michigan participate in the Donated Dental Service Program.

Appropriations # - 11363 Diabetes and Kidney Program

FY 04 Funds Appropriated \$1,801,300

FY 05 Funds Appropriated \$2,315,200

Michigan's Age-Adjusted Diabetes-Related Mortality Rate 1999 - 2003



Source: Diabetes, Dementia, & Kidney Section, MDCH.
*Rate age-adjusted to 2000 US population standard using ICD-10 codes as of 1999.

Project Name: Diabetes--Local Agreements

Target Population: Persons at-risk for or with pre-diabetes, diabetes and kidney disease

Project Description: These funds are distributed to agencies providing educational, managerial and other services intended to prevent or delay onset of diabetes, reduce mortality and morbidity from diabetes and kidney disease and improve the quality of life for persons with diabetes and/or kidney disease. The primary recipients of these funds are Michigan's six Diabetes Outreach Networks (DONs) and the National Kidney Foundation.

Project Accomplishments for FY 2004:

- The DON's Diabetes Care Improvement Program data on 5,266 clients indicated a 34% improvement in key clinical indicators (foot exams, hemoglobin A1C tests, lipid profile, flu/ pnuemococcal immunizations.
- The number of certified diabetes self-management education programs increased to 80; the number of people served to approximately 15,000.
- The Michigan Diabetes Partners in Action Coalition was organized to implement recommendations of the Michigan Diabetes Strategic Plan.
- The National Kidney Foundation continued to expand diabetes and kidney disease prevention programs in the community (Healthy Hair/Healthy Body beauty salon program) and in the schools (Kids & Kidneys; Kids Interested in the Care of Their Kidneys KICK).

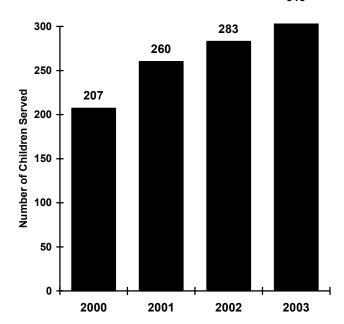
- Establish measurement procedures to track program success.
- Increase the rate of foot exams, eye exams, A1C tests and immunizations for people with diabetes.
- Reduce health disparities for high-risk populations.
- Promote wellness and healthy behaviors.

Appropriations # - 11393 Morris Hood Wayne State University Diabetes Program

FY 05 Funds Appropriated \$400,000

Number of Children Served in Comprehensive Clinics, 2000-2003

319



Source: Diabetes Program reports, MDCH.

Project Name: Diabetes—Morris Hood WSU Diabetes Outreach

Target Population: Children and adolescents with diabetes in underserved and rural outreach areas

Project Description: Provides comprehensive care to children with insulin dependent, type -1 diabetes living in geographical remote areas (serving some children with type-2 diabetes). Provides consultation and management to children living in the UP with endocrine diseases other than diabetes. New for FY 2004/05: Target Benton Harbor children who have risk factors for type-2 diabetes (metabolic syndrome).

Project Accomplishments for FY 2004:

- Outreach clinics were held in Marquette, Alpena, Jackson, Port Huron, Traverse City and South Haven. A total of 319 children were seen.
- 372 children with various endocrine disorders were seen in Marquette. Twenty-seven of 372 had a pre-diabetic condition, metabolic syndrome X and are involved in a primary prevention program for type-2 diabetes.
- Each child/family received an assessment of health status and compliance; problems are identified, diagnosed and treated by a comprehensive team of specialists (Pediatric Endocrinologist, MD, Certified Diabetes Educator, Registered Dietitian, and Social Worker).
- Families received individualized care plans and are empowered and educated with new information about diabetes.

Project Goals for FY 2005

- Provide comprehensive care to children who have type-1 diabetes who are either economically disadvantages or live in geographically remote areas.
- Provide consultation and management to children who live in the UP who have endocrine diseases other than diabetes.
- Target Benton Harbor to assess obese children for risk for diabetes, hypertension and cardiovascular disease.

Appropriations # - 15173 Newborn Screening Follow-Up and Treatment Services

FY 05 Funds Appropriated \$400,000

EHDI Program Select Data Facts 1999-2002			
	2001	2002	
Number of Michigan	133,247	129,518	
Births			
% Completed Hearing	80%	92%	
Screens Reports			
Referral rate from	3.3%	2.7%	
completed screens			
% Incomplete or	20%	8%	
missed hearing screen			
reports			
Average age hearing	222 days	111 days	
loss identification		_	

Source: MDCH, early Hearing Screening, Detection, and Intervention Program Data Facts Sheet

Project Name: Early Hearing Detection and Intervention (EHDI) Program

Target Population: All infants born in Michigan

Project Description: The project has three goals: 1) All infants will be screened for hearing loss before 1-month of age 2) All infants who do not pass the screening will have a diagnostic evaluation before 3-months of age and 3) All infants identified with a hearing loss receive appropriate early intervention services before 6-months of age. The EHDI program contributes directly to infants having language and communication experiences that support development. Grant funds have supported EHDI provider program training, literature development, database development, community development, follow-up activities and a family support system.

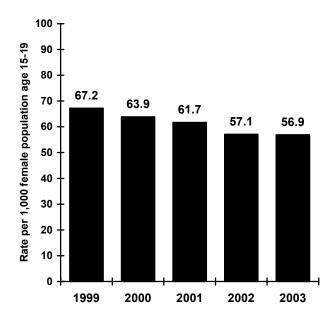
- The percent of Michigan births that receive newborn hearing screening will increase.
- The percent of babies who fail hearing screening who receive diagnostic evaluation by 3-months of age will increase.
- The percent of babies with documented hearing loss who receive early intervention services by 6-months of age will increase.

Appropriations # - 14281
Family Planning Local Agreements

FY 04 Funds Appropriated \$658,100

FY 05 Funds Appropriated \$658,100

Estimated Teen Pregnancy Rates (Age 15-19) Michigan Residents, 1999-2003



Source: MDCH. Vital Records and Health Statistics, 1/05

Project Name: Family Planning

Target Population: Females and males at-risk for unintended pregnancy.

Project Description: The Family Planning program provides low-cost, high quality contraceptive services and supplies. The mission of the program is to provide individuals the information and means to exercise personal control in determining the number and spacing of their children.

Project Accomplishments for FY 2004:

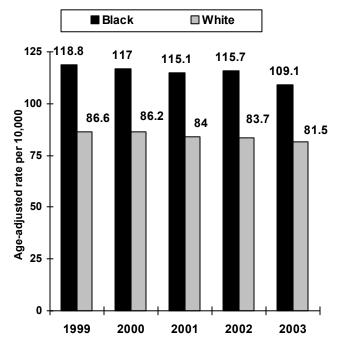
- Served 172,458 female teens and women under 250% of poverty (unduplicated count).
- Served 51,727 female at-risk teens.
- Screened 126,175 female teens and women for sexually transmitted infections (including HIV).
- Screened 112,632 female teens and women for cervical cancer (Pap smears).

- To serve at least 165,400 people with family incomes of under 250% poverty level.
- To serve at least 52,279 female teens at-risk for unintended pregnancy.
- To screen at least 112,632 female teens and women for cervical cancer (Pap smears).

Appropriations # - 11268 Minority Health Grants and Contracts

FY 05 Funds Appropriated \$900,000

Age-Adjusted Death Rates by Race Black vs. White 1999-2003



Source: MDCH, Vital Records

Project Name: Health Disparities Reduction Program (HDRP)

Target Population: African Americans, Latino/Hispanics, Native Americans, Asian Americans, and Arab/Chaldeans

Project Description: Funding will support highly targeted and evidenced-based prevention, health promotion, and screening services. It is the goal of the HDRP to reduce health disparities in the State of Michigan by supporting a portfolio of social/behavioral interventions that will have the greatest impact among racial and ethnic minorities in Michigan. This will be accomplished by funding programs that target populations at the greatest relative risk and provide services that have documented health promotion and management potential.

Project Goals for FY 2005:

- Identify racial and ethnic minority populations with disparate healthcare and outcomes and develop interventions to reduce disparities in these populations.
- Provide resources to eligible agencies to design and implement interventions in the following health areas: asthma, cancer (breast, cervical, colorectal, and prostate), diabetes, Genomics, HIV/AIDS, hypertension, infant mortality, lead poisoning, obesity/overweight, and smoking cessation.

The purpose of the Health Disparities Workgroup will be to:

- 1. Increase awareness of health disparities by disseminating data.
- 2. Decrease the burden of disparities by distributing information on public health interventions with proven effectiveness.
- 3. Establish a systematic approach to interdepartmental collaboration and communication.

Each funded project will be required to submit an evaluation plan as part of their proposal. The plan must include methodology for measuring both process, outcome objectives and a detailed work plan.

Appropriations # - 16778/16758 Immunization Program Management & Field Support

FY 04 Funds Appropriated \$2,024,100

FY 05 Funds Appropriated \$2,044,100

MCIR Historical Perspective of Registered User and Shots Recorded 1998-2003

Year	Register	Doses
	Users	Entered
1998	1,327	6.5 million
1999	2,007	5.5 million
2000	2,333	4.4 million
2001	2,815	8.3 million
2002	3,493	5.5 million
2003	4,242	4.8 million

Source: Immunization Section Program, MDCH.

Project Name: Immunization Registry and Administration

Target Population: Children ages 0 - 19 years.

Project Description: Michigan Childhood Immunization Registry (MCIR) is a regionally based, statewide childhood immunization registry that already contains over 38 million shot records of 2.8 million children under the age of 20 years. The department is currently working through subcontracts with six MCIR regions to enroll and support every immunization provider in the state. Currently, there are approximately 3,300 provider sites enrolled with about 5,000 daily user long-ins to the system. At any given time during the day, there are at least 300 simultaneous users on the system. Users are able to access a child's immunization record to determine if they need additional vaccines. The MCIR will generate recall letters to notify those responsible parties whose children have missed shots and encourage them to visit their immunization provider and receive the needed vaccines. The regional activities discussed above as well as the development of enhancements and maintenance of the system is funded using the Healthy Michigan Fund.

Project Accomplishments for FY 2004:

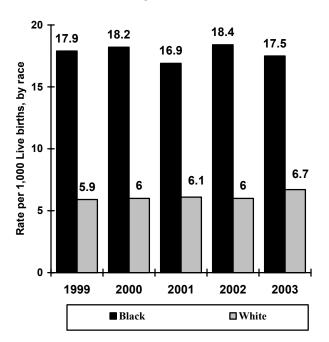
- Converted MCIR to a web-based application with easier access for providers.
- 85% of private provider sites that administer immunizations were enrolled in MCIR.
- 97% of the resident children ages 0-60 months were registered in MCIR.
- 100% of local health departments submitted data to MCIR at least weekly.
- 2,032 provider offices submitted immunization data in 2004 to MCIR.
- Providers have accessed MCIR records of at least 93% of our 19–36 month old children.
- Increased immunization completion rates for 2-year old children in MCIR 30% since 2001.

- Increase the number of providers accessing MCIR.
- Integrate school and childcare immunization reporting into MCIR.
- Target MCIR efforts to SE Michigan to recruit and train all immunization providers.
- Enhance the vaccine accountability inventory functionality within the MCIR to better track and account for vaccine being administered and inventoried around the state.
- Investigate the potential of integrating MCIR with other child health data sets.
- Investigate using MCIR to record immunizations of individuals of all ages.

Appropriations # -14259 Special Projects

FY 05 Funds Appropriated \$1,000,000

Infant Mortality Rate, by race Michigan 1999-2003



Source: Vital Records & Health Data Development Section, MDCH

Project Name: Infant Mortality

Target Population: Counties in Michigan with the largest disparity in black vs. white infant mortality.

Project Description: To reduce the racial disparity in infant mortality across Michigan funds will be contracted with local entities to initiate projects to meet specific needs identified through focus groups or other means of assessment. The department will provide county profiles to use as baseline data. Local communities are expected to engage key stakeholders in a collaborative effort to address the problem. In addition funds will provide state level staff support.

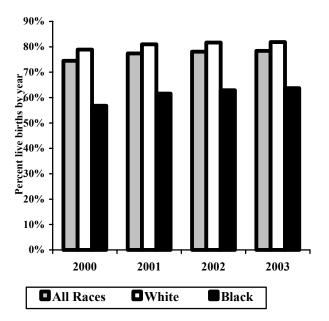
- African American women will have more planned pregnancies.
- African American women will have fewer pre-term births.
- African American infants will have fewer deaths from sleep-related accidents.

Appropriations # - 14262 Local Maternal/Child Health Services

FY 04 Funds Appropriated \$246,100

FY 05 Funds Appropriated \$246,100

Percent of Live Births with Adequate level of Prenatal Care, Race, Michigan 2000-2003



Note: The Kessner Index is a classification of prenatal care based on the month of pregnancy in which prenatal care began, the number of prenatal visits and the length of pregnancy (i.e. for shorter pregnancies, fewer prenatal visits constitute adequate care.)

Source: MDCH Division of Vital Records and Health Statistics

Project Name: Local Maternal/Child Health (MCH) Services

Target Population: Prenatal women, mothers, infants, children and adolescents of any income group with a special focus on those who are low income.

Project Description: The project provides support for local communities to address a MCH issue in their community that will impact the health status of this target population. There are 18 objectives of which any one or more can be addressed. If a community chooses an objective other than the 18, they must justify the reason why they chose that objective.

Project Accomplishments FY 2004:

- Twenty-three local health departments reported putting Local Maternal Child Health Block and local funds into supporting Prenatal Care Outreach and Advocacy services to assist prenatal women get into care in FY 03.
- These 23 agencies reported providing services to 10,938 women.

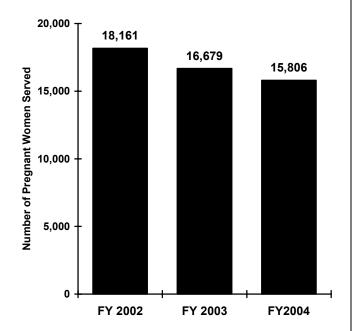
- The department monitors 18 health indicators for the objectives set forth by the federal Maternal/Child Health Bureau as required for federal funding. The indicators include an array of maternal/child health issue areas such as: immunization, lead screening, infant mortality, newborn hearing screening, children's health insurance cover, etc. In addition, Michigan sets nine more objectives that local agencies could choose from and that relate to their community needs.
- The more frequently chosen areas to use the funds for are healthcare services that address the needs of children with special healthcare needs, prenatal care outreach and enrollment, family planning, Maternal Support Services and Infant Support Services.

Appropriations # - 33500 Local MCH Services

FY 04 Funds Appropriated \$1,832,100

FY 05 Funds Appropriated \$1,575,500

Number of Pregnant Women Served, FY2002- FY 2004



Source: Medicaid Program Reports, MDCH.

Project Name: Maternal Outpatient & Medical Services (MOMS)

Target Population: Women who are currently or recently pregnant within two calendar months following the month the pregnancy ended, who apply for medical coverage for their pregnancy at a Local Health Department, Family Independence Agency, or Federally Qualified Health Center. Customers must also meet one or more of the following criteria: women with income at or below 185% of the federal poverty level who are applying for Medicaid; Women who are covered by the Medical Emergency Services program.

Project Description: Provides medical coverage for approximately 17,000 pregnant women annually. The program allows women to seek early prenatal care while awaiting eligibility determinations for Medicaid. Services covered include, prenatal and pregnancy-related care, pharmaceuticals and prescription vitamins, laboratory services, radiology and ultrasound, maternal support services, childbirth education, outpatient hospital care, and labor and delivery services including all professional and inpatient hospital services. Funding sources utilized for the MOMS program are SCHIP, Healthy Michigan Funds and general funds.

Project Accomplishments for FY 2004:

- Provided access to early prenatal care for women applying for Medicaid.
- Assisted in reducing infant mortality and incidence of pre-term labor.
- Assisted in reducing admissions into neonatal intensive care.
- Assisted in increasing infant birth weights.
- Provided information and scheduled annual MOMS meetings for LHD, FQHC's and FIA.

- Provide access to early prenatal care for women applying for Medicaid.
- Assist in reducing infant mortality and incidence of pre-term labor.
- Assist in reducing admissions into neonatal intensive care.
- Assist in increasing infant birth weights .
- Provide information and schedule annual MOMS meetings for LHD, FQHC's and FIA.

Appropriations # - 14276 Migrant Health Care

FY 05 Funds Appropriated \$340,000

Program Outcome Objectives:

- Time-framed measurable objectives will be used to determine the effectiveness of services provided.
- Program data on participant services will be analyzed based on outcome of services. This data will be sampled in each site to determine efficacy of services and service needs versus services provided.
- A year -end report will be developed by the contractor including the following information about the clients served:
 - Demographics
 - o Total number served
 - Content of services
 - Client outcomes by type of service
 - Any other pertinent data derived from program
- Recommendations will be developed jointly by the contractor and the program staff regarding needed program enhancements/changes

Project Name: Migrant Health Services

Target Population: Women and children with health problems. Those who experience domestic violence and/or need referral to additional services

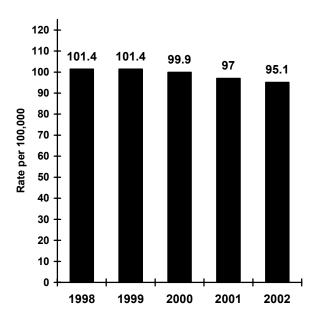
Project Description: This allocation will be utilized to re-establish the Camp Health Aide Program, which identifies individuals with serious health needs, experiencing domestic violence or with needs for referral to a variety of other services. The only agencies eligible for these funds are the four federally qualified migrant health centers in Michigan (Intercare, Health Delivery, Inc., Family Medical Center and Northwest Michigan Migrant Health Center). Funds are distributed related to the number of sites served by each agency. Since Intercare serves three separate areas, it will receive 50% of the Camp Health Aide funds.

- Re-establish the Camp Health Aide Outreach Program to identify Medicaid women and children in need of services in the six sites statewide.
- Implement the Camp Health Aide Outreach training, monitoring and reporting functions related to the identification of Medicaid enrolled clients in need of services.
- Implement four staff positions to support outreach to women and girls living in migrant farm worker camps who are victims of domestic violence.
- Implement a Continuous Quality Improvement Evaluation of activities to re-establish the Camp Health Aide Outreach Program to identify Medicaid women and children in need of services in six sites statewide and to Implement the Camp Health Adie Outreach Program training, monitoring and reporting functions related to the identification of Medicaid enrolled clients in need of health services.

Appropriations # - 11380 Chronic Disease Prevention

FY 05 Funds Appropriated \$400,000

Michigan Age-Adjusted Hip Fracture* Rate, 1998-2002



Source: Michigan Inpatient Data base, DVRHS, MDCH.

* Cases were Michigan residents, discharged from a hospital (MI, IN, OH, WI) in 1998, 1999, 2000, 2001, 2002 with a principal diagnosis of hip fracture (ICD-9-CM 820.0-820.9). In-hospital deaths were included. Age-adjusted annual rates were calculated using the U.S. 2000 Standard population.

Project Name: Osteoporosis

Target Population: All residents of Michigan. The project initiatives target women, senior citizens, children and adolescents, and healthcare providers.

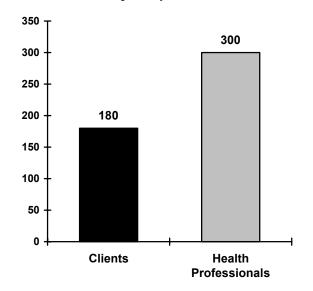
Project Description: The primary objectives are prevention, detection, and treatment of osteoporosis and osteopenia to reduce both the prevalence of osteoporosis and the number of osteoporosis-related fractures. Projects include public and professional education, community-based screening and counseling, dissemination and support for voluntary quality assurance standards for health professionals, and program evaluation. The Osteoporosis Project is administered through the Michigan Public Health Institute, which in turn subcontracts with community and statewide partnership agencies.

- Continue to expand community education programs to reach targeted population.
- Expand community risk assessment, reestablish comprehensive counseling and bone mineral density screenings for those at high-risk.
- Integrate osteoporosis curriculum into the Michigan Model Curriculum for Comprehensive Health Education.
- Complete the Diabetes, Arthritis, and Osteoporosis Behavioral Risk Factor Survey. Data will be used to guide project priorities.
- Reconvene the statewide Osteoporosis Strategic Plan Advisory committee to revise and disseminate the Michigan Osteoporosis Strategic Plan.
- Facilitate and support the work of the Michigan Consortium for Osteoporosis to educate healthcare providers and improve voluntary quality assurance standards.

Appropriations # - 11387 Michigan Parkinson's Foundation

FY 05 Funds Appropriated \$200,000

Number of Clients and Health Professionals Served Through the Multidisciplinary Clinic, FY 2001



Source: Agency Quarterly and Annual Report

Project Name: Parkinson's Disease

Target Population: People with Parkinson's disease and their families/caregivers; Health professionals serving those with Parkinson's disease.

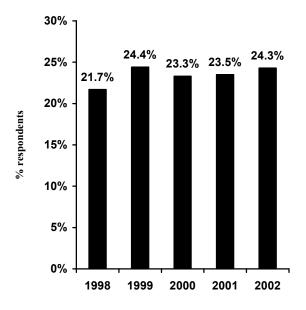
Project Description: The Michigan Parkinson Initiative will improve the quality of care provided to people with Parkinson's disease through multidisciplinary clinics; professional education, and community education

- Coordinate 3-4 regional one-day multidisciplinary second-opinion clinics to assist local physicians in the diagnosis and management of people with Parkinson's disease.
- Conduct 3-4 community education programs for people with Parkinson's disease and professional caregivers focusing on the practical management issues of dealing with the symptoms and consequences of Parkinson's disease.
- Implement 3-4 continuing medical education programs that focus on diagnosis and management of people with Parkinson's disease.
- Expand an educational "train-the-trainer" program to provide in-service training for extended care and respite care staff.

Appropriations # - 11369 Physical Fitness, Nutrition, and Health

FY 05 Funds Appropriated \$900,000

No Leisure-Time Activity*, Michigan Residents 1998-2002



^{*} Proportion respondents who reported they did not participate in any physical activities, recreation, or exercise in their leisure time within the past month. Source: Michigan BRFS, 1999-2002, MDCH

Project Name: Physical Fitness/Governor's Fitness Council

Target Population: Michigan children and adults

Project Description: The purpose of the project is to promote physical education and physical activity events in Michigan.

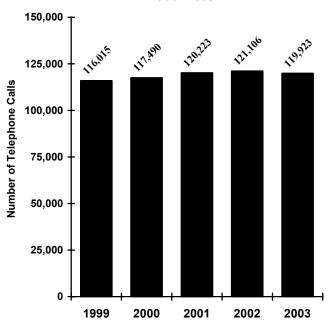
- Market Walk-to-School Day event to MI schools and register 200 schools.
- Produce two modules for EPEC (Exemplary Physical Education Curriculum).
- Organize Labor Day Mackinaw Bridge Run and encourage citizens to be active during the summer.

Appropriations # - 33860 Special Adjustor Payments

FY 04 Funds Appropriated \$300,000

FY 05 Funds Appropriated \$300,000

Number of Telephone Triages to Public, 1999-2003



Source: Division of Environmental and Occupational Health, MDCH.

Project Name: Poison Control

Target Population: All Michigan residents.

Project Description: The Michigan Poison Control System consists of two regional certified poison centers: Children's Hospital of Michigan Regional Poison Control (CHM) in Detroit, and the Regional Poison Control Center in Grand Rapids. The centers provide 24 hour/day, 365 days/year, toll-free telephone access for poison triage and first aid advice. The Poison Control program utilizes a comprehensive approach to preventing poison exposure through education of the public and to minimize severity of injury by education of healthcare professionals in the latest treatment for poisoning.

Project Accomplishments for FY 2004:

- Telephone triage to public (information and advice provided to callers).
- Consultative service to healthcare providers.
- Provided consultations by medical toxicologists.
- Provided public education through health fairs, community presentations, publications and other venues.
- Implemented a T1 line to provide database integration between Children's Hospital of Michigan Regional Poison Control Center (CHM) in Detroit and the Regional Poison Control Center in Grand Rapids.

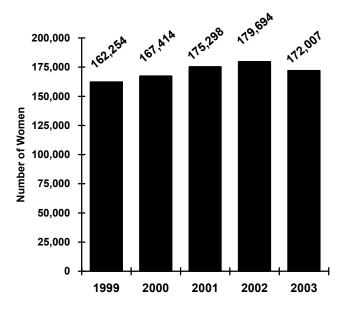
- Continue telephone triage to the public.
- Continue consultative services to healthcare providers.
- Continue public education at health fairs, community presentations, publications, and other venues.
- Continue T1 database integration between the Children's Hospital of Michigan Regional Poison Control Center (CHM) in Detroit and the Regional Poison Control Center in Grand Rapids.

Appropriations # - 14251 Pregnancy Prevention Program

FY 04 Funds Appropriated \$5,033,300

FY 05 Funds Appropriated \$5,033,300

Number of Women Receiving Pregnancy Prevention Services, 1999 - 2003



Source: Family Planning Annual Report, Women's and Reproductive Health Unit, MDCH.

Project Name: Pregnancy Prevention

Target Population: Females and males at risk for unintended pregnancy for family planning services, and adolescents (9-17 years old) and their parents/families for the abstinence program

Project Description: The Family Planning program provides low-cost, high quality contraceptive services and supplies. The mission of the program is to provide individuals the information and means to exercise personal control in determining the number and spacing of their children. Michigan Abstinence Program (MAP) promotes abstinence from sexual activity and related risk behavior and includes providing parent education and community awareness.

Project Accomplishments for FY 2004:

- Served 172,458 female teens and women under 250 percent of poverty.
- Served 51,727 female at-risk teens.
- Screened 126,175 female teens and women for sexually transmitted infections (including HIV).
- Screened 112,632 female teens and women for cervical cancer (Pap smears).
- Provided MAP programming to 17,342 clients 96% were youth and 4% were parents/adults/caregivers.
- Map served 16,701 youth participating in abstinence education activities with 11,833 youth participating in 14 or more hours of intensive activities.

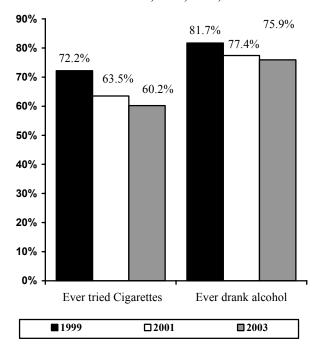
Project Goals FY2005:

- To serve at least 165,400 people with family incomes of below 250% of the Federal Poverty Level.
- To serve at least 52,279 female teens at-risk for unintended pregnancy.
- To screen at least 112,632 female teens and women for cervical cancer (Pap smears).
- To increase the number of Michigan youth choosing to remain abstinent from sexual activity and other risky behaviors.
- To increase the number of parents/adults/caregivers communicating effectively with youth regarding the benefits of abstinence from sex and other related risky behaviors.
- To increase the number of communities providing social environments that support sex-free and drug-free lives for youth.

Appropriations # - 14270 School Health and Education Programs

FY 05 Funds Appropriated \$500,000

Michigan Youth Behavioral Survey Results by Percentage of Michigan High School Students, 1999, 2001, and 2003



Source: Michigan Youth Risk Behavior Survey, 2003 Report

Project Name: School Health/Michigan Model

Target Population: School-aged children throughout Michigan and their families

Project Description: The Michigan Model provides comprehensive school health education for Michigan's school-aged children and their families. School Health Coordinators at 25 regional sites across the state provide health-related professional development, resources and ongoing support/technical assistance for public, charter and nonpublic schools in kindergarten through 12th grade. The Michigan Model for Comprehensive School Health Education curriculum is supported and updated through a statewide collaboration providing a research-based approach to health education. The Michigan Model is the primary health education curriculum used in kindergarten through high school.

Project Accomplishments for FY 2004:

- One million students and families reached with the Michigan Model in over 90% of Michigan's schools.
- Maintaining programmatic infrastructure for fiscal year 04.
- Ongoing provision of professional development, curriculum materials and technical assistance to teachers across the state.
- Ongoing development and piloting of new curriculum modules.
- Initiation of the curriculum revision/updating process.

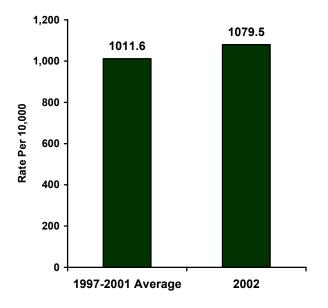
- Continue revision of the Michigan Model for Comprehensive School Health curriculum to ensure accurate and updated content that will lead to ongoing and more widespread use of the curriculum.
- Begin a new evaluation project for the Michigan Model for Comprehensive School Health in order to demonstrate program effectiveness.
- Provide Medicaid outreach activities in Michigan through designated school health regional sites.
- Provide ongoing technical assistance and professional development to Michigan school districts in the area of compliance with Michigan's new sex education legislation.

Appropriations # - 46512 Nutrition Services

FY 04 Funds Appropriated \$167,000

FY 05 Funds Appropriated \$167,000

Preventable Hospitalization Rate Patients Aged 65 and Older, 1997-2001 Annual Average and 2002



Source: Preventable Hospitalization Database, DVRHS, MDCH. *Average Annual Rate for 1997-2001.

Project Name: Senior Nutrition Services

Target Population: Homebound senior citizens age 60 and over.

Project Description: Home-delivered meals are served to those age 60 or older who are homebound and have no other means of meal preparation. Meals served must meet established nutritional requirements, such as 1/3 of the recommended dietary allowance (RDA), and be low in sugar, fat and sodium. Meals are to be made available at least 5 days per week. The Healthy Michigan funding enables the provision of meals on weekends and holidays, and support special diet meals as appropriate.

Project Accomplishments for FY 2004:

- The program provided 8.173 million meals to over 51,800 homebound seniors. The HMF portion equaled 41,646 meals.
- Total funding used to support of the home-delivered meals program was \$32,762,368. Federal funds comprised 39.6% of the funding, with the state and local levels contributing 32.3% and 28.1% respectively.
- Program participants contributed an average of \$.52/meal in donations which generated an additional \$5,977,456. These additional funds are included as part of the local percentage and used to expand the number of meals available.
- The additional 41,646 meals supported by the HMF increased the total number of meals eligible for federal NSIP reimbursement and generated an additional \$22,642 to support program activities.

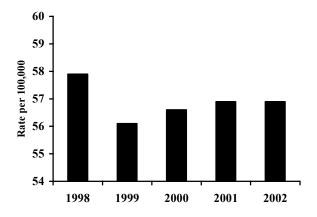
- Minimize reductions in services resulting from loss of revenue and/or increased costs.
- Improve the nutritional quality of meals served through implementation of revised standards and provision of targeted technical assistance to meal providers.
- Improve objectivity of the DETERMINE nutritional risk screening tool to achieve more accurate risk profile of individuals served.

Appropriations # - 11360 Smoking Prevention

FY 04 Funds Appropriated \$3,114,200

FY 05 Funds Appropriated \$3,165,100

Age-adjusted Lung Cancer Mortality Rate per 100,000 population in Michigan 1998-2002



Source: MDCH, Age-adjusted rates are computed by the direct method, using as the standard population the age distribution of the total population of the United States for the year 2000

Project Name: Smoking Prevention and Smoking Cessation Quit Kit Program

Target Population: Michigan residents (Youth, adults, seniors, Communities of Color)

Project Description: 1) Prevent youth from initiating tobacco use, educate the public on the dangers of secondhand smoke, promote smoke-free environments, and increase the awareness about the impact of tobacco on minority populations. 2) Encourage and assist tobacco users in quitting.

Project Accomplishments for FY 04:

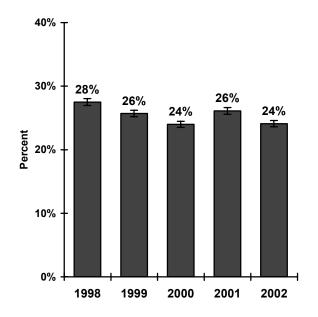
- Passed Genesee, Chippewa and Wayne County smoke-free worksite regulations.
- Smoke-free residence hall policies implemented at WMU, U of M, and Oakland University.
- Launched the Smoke-Free Apartment Initiative, including media campaign and receipt of a national award for creative web design for www.mismokefreeapartment.org.
- Launched media campaign to educate the public on the dangers of secondhand tobacco smoke.
- Developed, and began implementation of, the "Michigan Five-Year Strategic Plan for Tobacco Use Prevention & Reduction 2003-2008" and completed the Michigan Youth Tobacco Survey.
- The clearinghouse received 11,766 calls about tobacco and distributed 87,276 quit kits.
- Coupons for nicotine replacement products from pharmaceutical companies placed in all quit kits.
- Information about the toll-free quit smoking telephonic coaching program distributed in all quit kits.

- Increase number of schools that implement 24-hour/7-days-a-week tobacco-free school policies.
- Increase the number of youth recreational facilities with 24-hour tobacco-free policies.
- Establish an Organized Labor & Tobacco Advisory Board to increase awareness of the dangers of tobacco use and decrease tobacco usage among blue-collar workers.
- Ensure compliance with the Michigan Clean Indoor Air Act; promote smoke-free environments for both government and private worksites.
- Provide technical assistance/resources to increase the number of restaurants, localities and minority-owned businesses with smoke-free policies. Increase collaboration with organizations and worksites that primarily employ and service youth/young adults to decrease smoking rates in this population.
- Launch web-accessible "Michigan Smoke-free Database."
- Establish a statewide youth and tobacco advocacy network.
- Increase enforcement of the Youth Tobacco Act and disseminate Youth Tobacco Survey findings
- Complete the Michigan Adult Tobacco Survey and collect tobacco-related data on Michigan's disparate populations.

Appropriations # - 11360 Smoking Cessation Nicotine Replacement Therapy Program

FY 05 Funds Appropriated \$1,500,000

Smoking Prevalence in Adults, 1998-2002



Source: Data for Adult (18 years and Older) Smoking Prevalence is taken from the BRFS, MDCH.

Project Name: Smoking Cessation Nicotine Replacement Therapy Program

Target Population: Uninsured Michigan smokers

Project Description: The nicotine replacement therapy program—a program to provide a supply of nicotine patches or gum—was mandated by the legislature in June 2004. A total of 1.5 million dollars for FY 05 was budgeted to supply nicotine replacement therapy (NRT) to Michigan residents who wish to quit smoking. The implementation date was set for October 1, 2004. During the remaining 3 months of FY 2004, a protocol was developed to supply NRT through the Michigan Quit Line. Distributing NRT through the quit line allows the Department to: 1) Screen callers for medical conditions that might contraindicate the use of NRT 2) Instruct callers in the proper use of NRT to avoid an under or overdosing situation and 3) Screen callers to ensure medication is not distributed to minors without parental permission and medical supervision. A 2-month supply of NRT is mailed to callers who are eligible. The decision was made to limit distribution to the uninsured as they are the most at risk, least likely to be able to afford medication and are statistically far more likely to be smokers

Project Accomplishments for FY 2004:

- The clearinghouse received 11,766 calls about tobacco
- The clearinghouse distributed 87,276 quit kits.
- Coupons for up to \$5.00 off nicotine replacement products were obtained from pharmaceutical companies and placed in all quit kits.
- Information about the new toll free quit smoking telephonic coaching program was distributed in all quit kits.

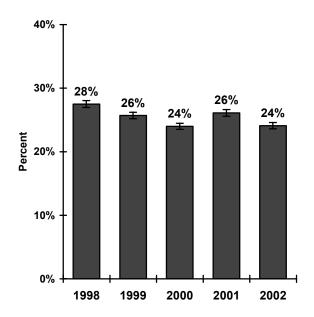
- A quit rate of 25% after 6 months is projected for those using the NRT program.
- Over 8,500 uninsured people are expected to participate in the NRT program.

Appropriations # - 11390
Tobacco Tax Collection & Enforcement

FY 04 Funds Appropriated \$810,000

FY 05 Funds Appropriated \$810,000

Smoking Prevalence in Adults, 1998-2002



Source: Data for Adult (18 years and Older) Smoking Prevalence is taken from the BRFS, MDCH.

Project Name: Tobacco Tax Collection and Enforcement

Target Population: Individuals and retailers who purchase/sell tobacco products illegally

Project Description: Protects Michigan, its economy and welfare through the prevention and suppression of organized smuggling of untaxed tobacco products into Michigan through enforcement of the tobacco tax act and other laws pertaining to combating criminal activity in the state of Michigan.

Project Accomplishments for FY 2004:

- Identified crime trend of individuals and retailers illegally purchasing tobacco products over the Internet to avoid paying state tobacco tax.
- Educated and worked directly with the public, private industry, and government entities associated with the tobacco industry on the problem with Internet sales.
- Developed a partnership with the United States Postal Inspection Service in order to identify and investigate purchases over the Internet.
- Implemented and facilitated training programs across the state with regards to tobacco tax enforcements and identifying tobacco smuggling.
- Assisted federal, state and local law enforcement agencies on complaints related to theft of cigarettes and tobacco smuggling
- Worked closely with the State Police's Joint Terrorism Task Force liaison as a Homeland Security Resource.
- Worked closely with the Department of Treasury on identifying individuals liable for assessments.
- Handled over 200 tobacco tax complaints across the State of Michigan.
- Arrested over 15 individuals for felony violations of the Tobacco Tax Act.
- Conducted routine inspections of retailers across the state.
- Seized approximately \$330,000 dollars in contraband tobacco.

Project goals for FY 2005

- Continue to identify and investigate criminal figures and various organizations committing tobacco smugglings.
- Continue to facilitate training programs to law enforcement on identifying tobacco smuggling.
- Continue to identify trends of smuggling and strategies to combat such activity.
- Continue to show a strong presence in regulating the industry through retail inspections.
- Increase felony arrests of violators from the previous year.
- Increase seizure amounts from the previous year.
- Continue developing partnerships with government entities in combating all types of smuggling.

Appropriations # - 12271 Local Health Services

FY 04 Funds Appropriated \$220,000

FY 05 Funds Appropriated \$220,000

Accreditation Program Goals

- 1. Assist in continuously improving the quality of local public health departments
- 2. Establish a uniform set of standards that define public health and service as fair measurement
- 3. Ensure local level capacity to address core functions of public health
- 4. Provide a mechanism for accountability to demonstrate effective use of financial resources.

Project Name: Training and Evaluation--LPHO

Target Population: 45 Local Public Health Departments serving 83 Michigan Counties.

Project Description: The mission of the Michigan Local Public Health Accreditation Program is to assure and enhance the quality of local public health in Michigan by identifying and promoting the implementation of public health standards for local public health departments; it evaluates and accredits local health departments on their ability to meet these standards. The program is a collaborative effort between Michigan's forty-five local health departments (LHDs), the Michigan Departments of Community Health (MDCH), Agriculture (MDA), and Environmental Quality (MDEQ), and the Michigan Public Health Institute (MPHI). Of the 45 local health departments, thirty-five are accredited with commendation and ten are accredited.

Project Accomplishments for FY 2004:

- One hundred percent of Michigan local public health departments have now been accredited through this program.
- Twenty-one on-site evaluations of local health department programs were conducted during 2004.
- Michigan's accreditation program served as a national model and continues to positively impact the health of Michigan citizens.

- Continue on-site review of local health departments to assure local level capacity to provide services and ensure minimum program standards are met.
- Retool the administrative capacity (infrastructure related) components of the accreditation process using Michigan's public health code as the legal framework.
- Explore the use of incentives and or sanctions for accreditation/non-accreditation.
- Revise program standards in accordance with changes in state/federal law, rules, policy, or professional standards of practice.
- Implement quality improvements identified through the Accreditation Quality Improvement Process.
- Explore incorporation of National Public Health Performance Standards for local public health.